File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM

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PM 1-20

2009 IAN 21 AM IO: 55

Fax: 515-281-4073	DISCLOSURE S	SUMMARY PAGE	2009 J	AN 21 AM IU: 55
COMMITTEE NAME (Must be	same as on Statement of Organia	zation)		
IMPORTANT: Indicate by # type (1)Statewide/Legislative/Judge (4)County Central Committee (4)	of committee you are reporting for: Standing for Retention Candidate (2)s County Candidate (6)City Candidate Type PAC (9)City PAC (10)School Box	presentative State PAC (3) State Party P (7) School Board or Other Political	D (Rev	R-2 DISCLOSURE REPORT Office Use Only 1785
Office Sought State	ONLY: Cooper Representative ble civil and criminal penalties. Pursu Cooper		Scan Comp Audit	01(3), the candidate, for a
SIGNATURE OF PERSON FI	ING REPORT	TELEPHONE		DATE SIGNED
CHECK IF AMENDMENT T	eport date)	Necelution Form DD 2	Local Commit	ees, enter Date of Election
(You must continue to	o file reports until a DR-3 is filed.)	Joseph Market	County & Loca which Election	al Committees, enter County in is held
CASH ON HAND at the begin	ENT OF CASH ON HAND ning of the reporting period. (Total punt MUST be the same as the caseriod or must be zero if this is first	sh on hand at the end	s	292.81
	Y TAKEN IN THIS PERIOD	•		
Schedule A: Cash C	ontributions total (Attach Schedule	A) (*also see in-kind below)		150,00
Schedule F: Loans I	Received total (Attach Schedule F)			-0-
Schedule H: Total S	ales of Campaign Property (Attach	Schedule H)		- 0 -
(Schedule I	l applies to Candidates' Commit	ttees Only) SUB-TOTAL	\$	442.81
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD			438,88
Schedule B: Expend	litures total (Attach Schedule B) (**	also see debts and loans below).		
Schedule F: Loan R	epayments total (Attach Schedule	F)	·······	in with Sec. B
CASH ON HAND at the end o	f this reporting period (if final repor	t balance must be zero)	\$	3, 93
**UNPAID BILLS (From Sche	dule D - Attach Schedule D)		\$	509,53
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedul	le E)	\$	
**OUTSTANDING LOANS (Fr	om Schedule F - Attach Schedule	F)	. \$	2350,00
CONSULTANT BREAKDOW	N (Schedule G Attached?)			YES $\underline{\hspace{0.1cm}}^{\hspace{0.1cm}}\hspace{0.1cm}^{\hspace{0.1cm}}\hspace{0.1cm}^{\hspace{0.1cm}}\hspace{0.1cm}$ NO
CANDIDATE COMMITTEES	ONLY:			_
VALUE OF CAMPAIGN PRO	PERTY (From Schedule H - Attach	Schedule H)	\$	-0-

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Cooper for State Representative	1	CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE	LIST THE PAC IDE	ENTIFICATION

SCHEDULE

MONETARY

DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/17/08	ID# CK#	Sharon Jungers, 6856 Ired abon Pl Samesville, Va 20155	None	\$50,00	
10/22/08	ID# CK#	Dale Juergens P.O. Box 68 Clearfuld Da 50840 Cauble Peterson	None	50,00	
10/24/08	ID# CK#	Caubll Peterson 2623 K Que Red Dato Ja 51566	None None None	50,00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#				-
	CK#				
	ID# CK# ID#				
	CK#		SUB-TOTAL	150 00	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Ωf (for Schedule A) FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)				
		r State Represe	entative	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/20/08	ID#1785 CK#1025	Wal Mart Maryvelle Mo.	inh & card stock	\$ 53, 71
	ID# 1785 CK# 1026 ID# 1785 CK#		repay for ink + card stock	53.71
108	1027	Veid	Void	void
11/5/08	CK#/018	Bedford James Press 313 Main Bedford Ja 50833	adverlising	20.00
11/5/08	CK# 1029	Creston Reus advitue PO BOX 126 Creston La 50801	/	39,20
16/08	CK# 1020	mt ayr Record-News 122 madison Mt ain da 50854	advertising	15,40
11/6/08	ID# 1785- Ск# 1031	Diagonal Ja 50845	advertising	5,00
11/16/08	ID# 1785- CK# 1031 ID# 1785- CK# 1032	Odalus Co. Free France 729 Davis ave Corning La. 50841	advertising	17.00
		\lor	SUB-TOTAL	\$ 204.02
			TOTAL (if last page of this schedule)	s —

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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· ~g~			

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) presentative CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE **ID NUMBER EXPENDITURE** (DESCRIBE TRANSACTION) EXPENDED **EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER 31566 150,00 CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 2 of 2

COMMITTEE N	NAME (Must be same as on Statement of Organization) Per for State Repressional Period on this period.	entative		CK THIS BOX MENDING
(DO NOT IN	LIGATIONS REMAINING THIS REPORTING PERIO CLUDE LOANS SHOW LOANS ON SCHEDULE	F)	goods or serv received, but end of the rep regardless of has been received.	debt" is a debt for rices ordered or not paid for by the porting period., whether an invoice eived.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED OF PURCHASED		LANCE OWED AT CLOSE OF REPORTING PERIOD*
10/20/08 Thur 12/31/08	Dennis R Cooper 2018 250th St Bedford La 50833	travel	5	109, ⁵³
, ,				
		· · · · · · · · · · · · · · · · · · ·		

SUB-TOTAL

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD

Page _of_ (for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

^{*}If actual figure is unknown, show "estimated" beside the figure.

DMMITTEE NAME (Must - Ooper fo	be same as on Statement of Organization) r State Representa	tive	SCHEDULE F (Rev. 02/08) LOANS RECEIVE & REPAIR
TE: This schedule repo	orts money loaned to the committee which is deposited in ROM LAST REPORTING PERIOD \$	the committee account.	CHECK THIS BOX
(Original source	ANS RECEIVED THIS REPORTING PERIOD of loan, such as a bank, must be shown if a third party is	involved. Include loans from	candidate's personal funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP CANDIDATE (If Appli	
			\$
		TOTAL (PART I)	\$ <u>-Ö-</u>
ART II - MONETARY L (Loans forgiver	OAN REPAYMENTS MADE THIS REPORTING PERIOD THIS PERIOD THIS REPORTING PERIOD THIS REPORT PERIOD THIS PERIOD THIS REPORT PERIOD THIS PERIOD THIS PERIOD THIS PERIOD THIS PERIOD THIS PE	DD s.)	
DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP CANDIDATE* (If App	
11/7/08 D	ennis Cooper 2018 250 h St Dedford La 50833	Candida	\$
	,		
	, t,		
	TOTAL CA	SH REPAYMENTS (PART II)	\$ 150.00
	From Schedule E - T TOTAL OUTSTANDING LOANS	OTAL LOANS FORGIVEN S END OF REPORT PERIOD	\$\frac{150.00}{-0-}\$ \$\frac{-0-}{350.00}\$
making a contribution to consanguinity (blood rel	candidate committees to disclose the relationship of an the committee. Relationship must be shown to the third atives) and affinity (relatives by marriage). If surname o but there is no familial relationship, enter "not applicable	degree of f contributor is	agelofl (for Schedule F)